

# WORONI 5

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A GARLAND FOR MAM DAD

# Jesus WHO?

## WORONI'S EASTER SPECIAL OPEN LETTERS TO God

"Batter my heart, three person'd God; for, you  
As yet but knocke, breathe, shine, and seeke to mend;  
That I may rise, and stand, o'erthrow mee, 'and bend  
Your force, to breake, blowe, burn and make me new.  
I, like an usurpt towne, to 'another due,  
Labour to 'admit you, but Oh, to no end,  
Reason your viceroy in mee, mee should defend,  
But is captiv'd, and proves weake or untrue.  
Yet dearly'I love you, 'and would be loved faine,  
But am bethrod'd unto your enimie:  
Divorce mee, 'untie, or breake that knot againe,  
Take mee to you, imprison mee, for I  
Except you 'enthral mee, never shall be free,  
Nor ever chaste, except you ravish mee."

*John Donne, 17 century poet, churchman, roué*

"Batter my sav., three person'd God; for I  
Am reeling under my inadequacies and misery.  
For Christ's sake, do something! Even flog me  
and whip me, or send a few volts through me,  
'cause I feel terrible. This hangover, and the  
fact that my coy mistress sent me away, at bedtime,  
with a flea in my ear (. . . she said she was sick  
of being compared to the stiff foot of a compass. . .)  
make me realise that vale of tears is no under-  
statement. The thing is that I *want* to believe,  
in you, would love to be confident that you see,  
All I do, and still love mee. (thousands wouldn't. . .)  
We all need something to lean on, it's only human  
nature. Being a nobleman and a hit with the ladies,  
isn't everything, sometimes I wish I was just a  
peasant tending sheep, like you said you were.  
Sounds terribly relaxing . . . I'm just banking on  
the afterlife, with no more temptations of the  
flesh. You know what I mean. I wonder if you could  
help me temper this. It's just that I find a well-  
turned bustle so irresistible, and, well, women seem  
to like me. Wish you were here.

Yours in unholy anguish,  
I remain etc.

P.S. Give my love to the other two.

*Student 711557, Canberra 1976*

## At my desk

Included in the last issue of *Woroni* was Pat Eatock's account of the "unfortunate" incident in the bar one night. The incident was not atypical of our Union Bar- it was a physical manifestation of a very common attitude towards women, Women's invasion of men's sacred domain- the pool table, has indeed been the initial cause of a lot of antagonism in the bar. We are sick of hearing heavy, masculine, boring voices loudly denouncing the "fucking sheilas" for using the tables. We are also sick of being molested by randy men in the bar- so FUCK OFF.

In this issue of *Woroni* the four middle pages are designed to be lifted out, and made into a booklet - if you follow the directions, only three folds have to be made, then the edges can be cut, the centre stapled, and VOILA! - a lovely sixteen page booklet about vaginal infections - we hope this will be of considerable service to our readers, particularly the women - but not exclusively the women, for we consider *people's* health to be a genuine social issue.

*W hoopee!!!*



ATTENTION ALL CLUBS AND SOCIETIES! It is important that you leave an address (an internal one is preferable) so that mail can be sent to you! Please contact the S.A. office as soon as possible!

Want to go Skiing this year? The ANU Ski Club offers its members skiing weekends, accommodation and equipment at low cost. Join at the Sports Union now and let us know what your interests are.

The Psych. Students' Association presents a discussion on **PSYCHOLINGUISTICS** Thursday 22 April in Psych. Building, Rm.111. Also end of term break-up - Friday 30 April at 7.30 p.m. in Psych. Building, Rm. 111. Everyone and anyone welcome.

**REMEMBER MAY DAY!  
JOIN THE MARCH IN PETRIE  
PLAZA, SATURDAY 1ST MAY.**

**SHOW YOUR SOLIDARITY WITH  
THE PEOPLE'S STRUGGLES!**

The Editors of *Woroni* wish to apologise for the misprint in 'The Coming-Out-Radio Not-Show' where due to an oversight Radio ANU was printed as broadcasting on a frequency of 1620 mh. The author of the article did write 1620 khz. We apologise for any confusion our mistake has caused.

TO WHOM IT MAY CONCERN . . . If anyone (including Mr Hutcheson) would like to learn or argue about God, Marcel Schoppers is available on Tuesdays at 1pm, at GA7, A.D. Hope Building.

Motorcycle-Scooter for sale. Honda 50cc. Please ring extension 4604 (office hours).

**STUDENT HEALTH SCHEME  
JOINING PERIOD EXTENDED -  
APPLICATIONS CLOSE APRIL 30**  
The joining period for the Australian Union of Students Friendly Society *Studentplan Health Scheme* has been extended and now closes April 30.

## Low cost student health scheme.

Applications for the Studentplan Hospital and Medical scheme close on March 31. Cover for hospital is up to the charges for Intermediate ward in a private hospital. Ask now at your local SRC/Students Assoc/Union/Guild, or write to 97 Drummond Street, Carlton 3053.

**AUS Friendly  
Society**

## AUSTRALIAN COUNCIL OF CHURCHES - Two noted South Africans brand foreign investment.

A statement charging that foreign investment in South Africa is "devoid of all morality" was issued in Johannesburg on March 10th by two prominent South African personalities - Chief Gatsha Buthelezi, Prime Minister of the Kwa-Zulu Bantustan, "homeland" of South Africa's four million Zulu people and Dr C.F. Beyers Naude, Director of the Christian Institute.

The jointly signed document called for a national convention "in which the Blacks in South Africa can speak for themselves on the matter of foreign investment."

A major point in that statement was the contention that "a radical redistribution of wealth, land and political power is essential for the establishment of a stable and moral society in South Africa".

Over a century of "capitalistic paternalism" has seen people consistently dehumanised, "the many blatantly crushed to produce wealth for the few and the whole of society designed to protect and intensify this naked exploitation of man by man (sic)." For this reason Chief Buthelezi and Dr Naude felt "this capitalistic endeavour is doomed."

Both signatories had earlier hoped that foreign investors could assist change in South Africa. But Dr Naude, in a personal note, said, "new facts have emerged on the relative ineffectiveness which foreign investment has had in achieving meaningful change towards a just society".

The two therefore stated unequivocally that "foreign investment in the central economy is devoid of all morality".

This statement has been welcomed by the Australian Council of Churches as it follows the line taken by the General Meeting of the Council in February 1975. "It should help the member churches to continue to implement with renewed vigour the A.C.C.'s call for member churches to use shareholder voting power to seek the withdrawal of investments by companies involved in South Africa," said A.C.C. Information Officer, Mr Russell Rollason.

"The statement has come at an important time for Australian Churches. Only recently the Prime Minister, Mr Fraser, indicated his support for increased trade with South Africa. I hope the church people in Australia examine this statement from these two South African leaders and continue to urge the Australian Government to cease all economic, sporting and cultural co-operation between Australia and South Africa. This boycott should continue until such times as the Government of South Africa removes legislation discriminating against non-white, such as the Pass Laws and the Migrant Labour system, and takes steps to ensure that non-white South African workers are no longer subjected to discrimination and exploitation of their labour", said Mr Rollason.

# DEATH OF



The standard and "ethical" use of E.C.T. has become highly controversial. It is a barbaric and unsuccessful way to try to cure people's problems, of convenience to doctors and nurses, but frightening to the patient. It is also a civil rights issue. Because of the authoritarian and "we know best" attitudes of the profession, the patient's right to refuse is often disregarded and the nature of the treatment may not be honestly explained.

# THE MIND

An interview with a psychiatric nurse at Callan Park psychiatric hospital, Sydney.

**Question** — Have you ever seen a patient benefit from Electro Convulsive Therapy?

**Answer** — An Englishman, 45 years, was admitted because he was hearing voices. On the first day he reported that he was hearing voices saying that the Queen was a filthy bastard. He escaped from Callan Park in his pyjamas to Balmain Police Station three kms. away to sign a confession that he was an anarchist (because of the voices he had heard). He was returned to Callan Park but escaped to the Police Station again the next day to sign a confession that he had raped two young girls, which was what his voices were telling him. After two subsequent episodes of confession signing at Balmain Police Station he was sent by his psychiatrist for a course of E.C.T. After ten visits to the E.C.T. unit I came in and asked him if he was hearing any more voices. He had been sitting all day with a big smile on his face! He said yes, he was still hearing voices. I asked him what the voices were saying. He said they were saying that he's a very nice fellow. So there appears to be some people who benefit from E.C.T.!

Electro convulsive therapy is a form of treatment administered to psychiatric patients who are diagnosed by psychiatrists as being in need of E.C.T. It is administered in a specialised E.C.T. unit where 120 volts of electricity are passed through the head of the patient for one second causing a convulsion (hence the name E.C.T.). Usually there are 6 to 12 doses ranging over a period of one to three weeks. When it was first used there were many cases of broken bones and tongues bitten off as a result of the violent contraction. However today there is a far safer procedure because of drugs, mouthguards, etc. which counteract the damaging physiological effects of E.C.T.

The main symptomatic indications for E.C.T. are (1)

1. Catatonic stupour (seldom seen today)
2. Depressed stupour
3. Incapacitated delusional state.
4. Psychotic depression.

Unfortunately many people are given E.C.T. in psychiatric hospitals for psychological conditions for which E.C.T. should never be used. In many cases where the psychotherapist is unable to cope with a patient he prescribes E.C.T. even if the usual indications for its use, outlined above are not present. At other times it is used as punishment for patients who refuse to accept their role as psychiatric patient (i.e. labelled as unmanageable). (2)

Now I'm going to discuss the advantages and disadvantages of E.C.T. Who derives benefit from E.C.T.? This is a complex question. Firstly, we have to look at the nature of government bureaucracies which deliver health care to the community. E.C.T. is attractive to health bureaucracies because it provides an easy assessment of costs and benefits — cost is defined as the expenditure on capital costs, operating and staffing costs of maintaining an E.C.T. unit and benefit can be assessed by the number of shocks administered. This of course is an idiotic criteria of benefit but for bureaucracies obsessed with irrelevant statistics this is ideal. So, we can say that health bureaucracies benefit from E.C.T.

Psychiatrists benefit from E.C.T. because it is an actual and potential

sanction which they can use on psychiatric patients who refuse to conform to the values and roles constructed by psychiatric hospitals for patients to be socialized into.

However, for the psychiatric patient, the benefits are dubious. Many patients who have E.C.T. return to psychiatric wards after being discharged as cured. In only one type of psychiatric condition which is found in psychiatric hospitals, there is a strong case for the use of E.C.T. When a person arrives at a psychiatric hospital in a severely depressed state and is extremely withdrawn so that he cannot be communicated with and if all other attempts at alleviating his withdrawn state fail then E.C.T. can quite often have a remarkable initial effect in bringing people out of a severely withdrawn state. E.C.T. has only been shown to have short term benefit in bringing people out of endogenous depressed states.

A major civil rights issue is involved in the use of E.C.T. where involuntary patients are concerned. (3)

E.C.T. can be viewed as a social thought control mechanism administered to people who are forced against their will to stay in psychiatric hospitals and be treated because their ideas and behaviour are unacceptable to the majority in our society. (4) The

psychiatrist when faced with these people and is unable to attain their co-operation in changing their ideas and behaviour sends them for E.C.T. in the hope that they will at least co-operate with their treatment when they return (even if only for fear of another course of E.C.T.) This is similar to the treatment which political dissidents receive in psychiatric hospitals in the U.S.S.R. However, because we can initially label these people as psychiatric patients and de-humanise them in the process, changing their ideas and behaviour becomes a medical not a political act.

E.C.T. is currently misused more often than it is legitimately used. If E.C.T. was discontinued then those patients who suffer from endogenous depression would end up in catatonic states. For a more beneficial use of E.C.T. we must train psychiatrists to be more competent in dealing with patient's problems without having to subject them to E.C.T. and change the health care bureaucracies to take a sensible approach in determining the costs and benefits of health care. An approach which considers the long and short term psychological benefits on the recipients of health care.

1. Interview with Dr Brian Willis, psychiatrist, Ward 20, team leader, Wollongong Hospital.
2. Information received from psychiatric nurses interviewed at Callan Park.
3. Involuntary patients are those who are forced against their will to stay in psychiatric hospitals.
4. This view is put forward in Thomas Szasz book *Ideology and Insanity*, Penguin 1973.

#### REFERENCES:

- The Pharmacological Basis of Therapy.*  
*Comprehensive Textbook of Psychiatry* Freedman 4 Kaplan.

ERICA CALLAN

*you might as well live....*



# LETTERS

Dear Editors,

Upon reading the article on the Kerr demo in Woroni 4, I find the classical anti-cop viewpoint being displayed. All right, there was a small contingent of bad pigs. The law of averages dictates that there would have to be a small contingent as there is at least a small contingent of bastards in this world and there has to be some sort of flow on.

The rest of the cops were quite civil, showed tolerance, some even displayed the fact that they were in accord with our "cause" (i.e. the wrongness of Kerr's action) but they were forced to wait around for four hours to guard a person that they had no love for. It's understandable (though not justifiable) that a few meatheads would lose their blocks after all that waiting around, and we have to face this fact: some of us will get hurt, but there's no sense provoking them, it will just make things worse.

I. HUTCHESON

Ed. It has never been questioned that police are human beings. Anti-cop feeling springs from the fact that they, like the bulk of the population, are pawns for the Establishment. They act under instructions, not as people who just happen to be present at the demonstration. The fact that, as you say, some of them can express sympathy and yet be present in the role of hired thugs, proves this. It is the way the police are brought out, the role they are forced to play, and the unnecessary brutality of their instructions which explains anti-cop feeling. By implication, the presence of the police when valid and necessary protest is being articulated, shows that dissidence is considered a criminal activity. Do you think it is a reasonable state of affairs to be grateful and relieved to come home from a demonstration in one piece?

Dear Eds.

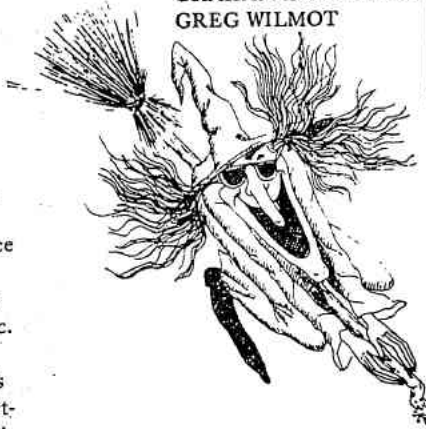
While the statistics quoted in the last Woroni about women in Forestry are fairly accurate, we were very surprised to see these statistics used to indicate that there is no sexism in the forestry department.

There are many instances of sexism in the forestry department as there are in the whole of this society.

1. Of the six women graduates from the department, we believe that five had honors degrees — suggesting a higher than average motivation?
2. Are most of the women graduates employed in research (i.e. all but one) because of a lack of opportunity in the most common area, viz. management?
3. Most States are not currently giving scholarships to women.
4. Some women HAVE actually been discouraged from doing forestry because of limited job opportunities for women. Since when has it been the responsibility of a Uni department to worry about jobs for graduates?

The situation can only change as people and institutions are confronted with their own sexism, and then, only in the context of wider change throughout society.

GRANT ROBINSON  
MELINDA BROUWER  
GRAHAM LIGHTBODY  
GREG WILMOT



Handmade by debs,pam,edith, maree,di,isabella,erica,joanne, shane,just..... and ian

## "Io Sono Mia"



5. It is not difficult to get the impression from pewter nights that the prime objective is to get pissed. Women often bear much of the brunt of the insulting behaviour which ensues from such activity. Of course, such behaviour cannot be exclusively attributed to foresters, as almost any night in the bar will verify.
6. For further documentary evidence of sexism in forestry, see "The Forestry Log" of any year or the film made by Forestry Follies Inc. last year.

Perhaps one reason why sexism is so pronounced in the forestry department is because forestry, traditionally (for sexist reasons) has been a totally male-dominated profession and has therefore tended to perpetuate more strongly, the sexist characteristics of this society.

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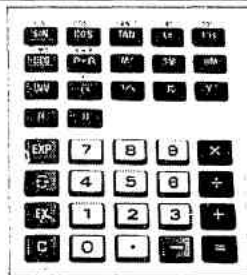
...by SANYO



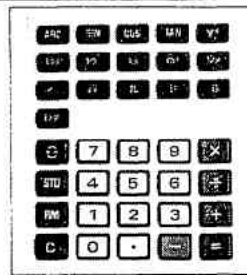
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SOM 77A

yes folks, it's

# more coming-out from

There was a very interesting article in the last *Woroni* — interesting for several reasons but mainly because it was both anonymous and inaccurate.

Because it is anonymous and inaccurate, the article gives a very bad picture of the station and rather than helping, it serves to create division within our ranks. Divisiveness only weakens our position and what we need right now is solidarity. We have the potential to become a part of "THE MEDIA" and right a few of the wrongs brought about by the deliberate misinterpretation of facts for which the "established media" are so well known. Yet, here in our own press, we dabble in the same abuse of the printed medium. But enough of impassioned pleas, let us now look at the inaccuracies of the article and put some light on the situation.

- 1) We are now on 1620 khz not 1620 mh. If "mh" means megahertz we'd be a VUHF station!
- 2) We have not had a budget of \$5000 pa for three years or \$5000 over three years. In 1974 our budget was \$2500, 1975 - \$3900, and in 1976 we have been allocated \$5000 of undergraduate students' funds.
- 3) According to it's constitution, the Radio Club has only three functions i) to promote Radio ANU on campus, ii) to promote an interest in broadcasting in general and iii) to promote the social life of the station. Long term planning decisions for Radio ANU are not made by the Club. The club can make *recommendations* for long term planning to CRSC who then decides whether to act on the recommendations or not.
- 4) Alterations to equipment have all been recorded. All original circuits have been recorded. There are certain peculiarities in the station's technical



set up but these are not in any way a determining factor in the station's programme chain. These peculiarities have come about through taking short cuts which are the result of inadequate budgets ever since the station started. Should our present engineer not be available it would take one week to a fortnight to complete a hand-over/take-over. Any claim that it would take six months is ridiculous.

5) The claim that the station needs "\$43,000 in capital expenditure to bring it up to Canberra-wide broadcasting capability" is belied by the fact that the station will be broadcasting Canberra-wide on an expenditure of \$5640. The \$43,000 loan referred to, is in fact a loan to upgrade the station to its maximum potential and was made before the possibility of the use of 2CA's old tower. Current expenditure/income figures are under constant review. A true and accurate figure can only be ascertained when a definite on-air date has been made.

## 2XX....

6) The question of the legality of the licence is fairly plain now. The 2XX licence was offered along with eleven others late last year. Of these three have already been issued — all issued, by the way, by a Liberal Government — five are pending and the last four are still under consideration. 2XX has received three written assurances that once operating conditions are cleared with New Zealand (and this was done a fortnight ago) the P & T Department could then issue the licence.

7) The dual problems of legal identity, and people having a say in the running of the station, can be solved by the creation of a completely new structure. The problem that so many people, students — particularly some law students — and many University Administration people are having, is that there are two licences — Radio ANU 1620 khz and 2XX 1010 khz — and only one structure (that's the Radio ANU one), and that structure was never designed to cater for our present situation. The Administration Committee has repeatedly approached the University to change the situation but the University, by its apparent inability to comprehend the fact that there would be a 2XX, totally frustrated any attempts to rectify the situation.

8) It is planned, now, to do broadcasting over the long vac. but there is no need to assume that it is an inflexible plan. We may have to close down over Christmas for four weeks, who knows? Three months after we go on-air a more accurate assessment will be available. Let's overcome our problems with getting on-air, then

we can consider our long-term planning.

9) Plans at this moment are to employ, if it is financially possible, one station manager, and a general useful with effect now. A technician will be necessary next year and we're planning for that. Walter Pearson has been asked by the Administration Committee to work full time on a fee for service basis at the rate of \$100 per week, in order to get the station on-air Canberra-wide. Mr Pearson was *elected* last year to the Station Manager position for a period of one year ending September 1976. It is claimed that Mr Pearson was paid without due consultation with other various campus bodies. The Administration Committee has a constitutional right to make payments to any staff member who is required to do any extra-ordinary tasks not laid down as normal duties. No consultation is *due* to any campus body. However, the Committee's action has been ratified by the Radio Club as necessary. The question is raised concerning the filling of the position "in a correct manner". If the writer can find a "correct manner" that could have been applied in November/December last year we would gladly have followed it. The answer here is as in no. 7 — the lack of a suitable structure.

David Johnson, Director Student Broadcasting,

Walter Pearson, Station Manager,  
Graham Gerard, Assistant Station Manager,

Chris Deacon, Chief Engineer,  
Mick Trimmer, Programme Manager,  
Chris Argyle, Announcer co-ordinator,  
Mike McFadden, Business Manager.

Administration Committee, Radio ANU — 2XX.  
[Eds. - What the fuck's VUHF, and CRSC, and the P&T Department? And this is communication?]

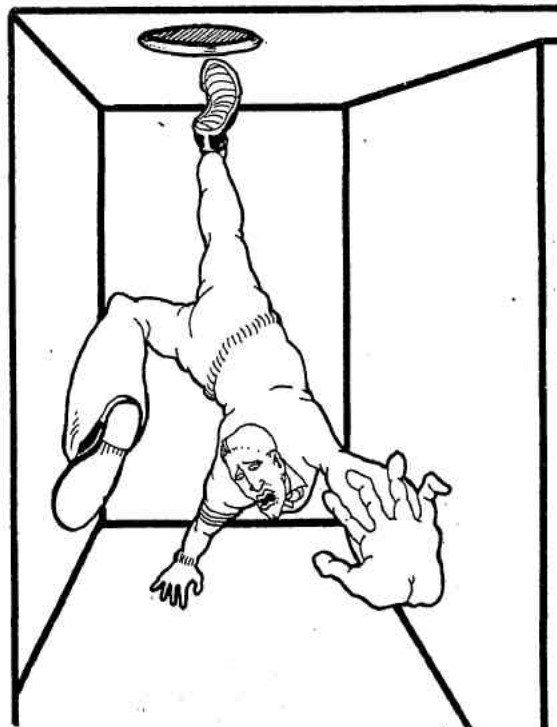
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# 2nd Class Citizens On Campus!?

A SHOCKING STORY...

Academics are forever telling us about those sublime properties of the university – objectivity, occupation of what the Greeks called 'the highest part of us' (the intellect), and transcendence over nature and the grotty strata of society generally.

Well, you don't have to look very far before you realise academia is no more transcendent than the American war memorial: just as academics have worldly professional concerns, they also have political beliefs and unconscious political biases.

One such political tenet is SEXISM. It is a very common and pervasive one, appearing in various forms and levels of sophistication. It is common because –

(i) MOST ACADEMICS ARE MEN (look around if you don't believe me) and men are the political oppressors of women. To retain economic and political power in patriarchal societies (like this one) men must oppress women (O.K. so men are 'socialised' and 'don't do it intentionally' but THIS IS NO EXCUSE. Anything is

reducible to 'socialisation' if you like, but this doesn't mean it's harmless or natural).

(ii) the university perpetuates a body of knowledge accumulated and developed by men through the ages. That knowledge reflects society through men's vision, not women's, and there is a difference because women have always occupied a different (usually subordinate) position in that society. (Just as the worldview of every other oppressed class and group is different to that of the white man). Most academics don't realise their own narrowness, or the fact that they can't represent women or children or the poor or non-whites.

(iii) the university is part of a sexist society that views women as inferior, inconsistent or weak. Woman's identity is also primarily sexual. This means that women's academic work is often judged by different standards to men's, that women are treated in condescending or patronising ways by staff, and that sometimes they'll

do anything, even use their power as staff over you as student, to try and get a fuck out of you.

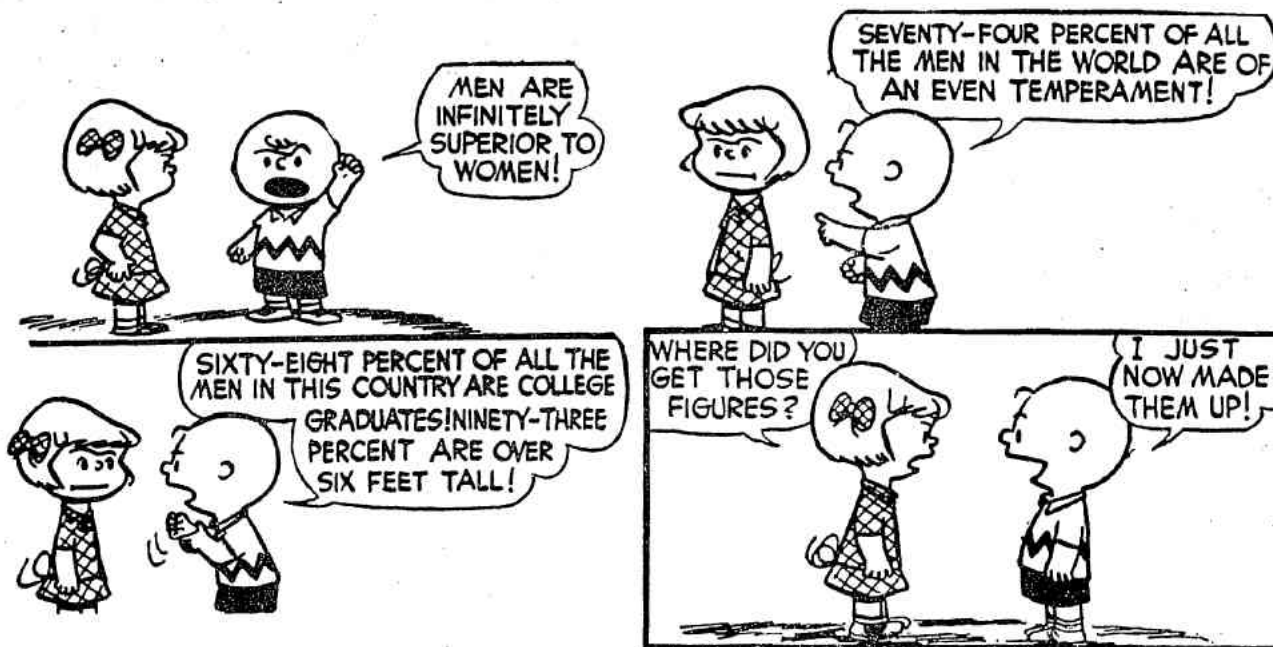
Sexist teachers insult women: from the almost universal use of 'he' to include women to the famous linguistics examples about men kicking women in the buttocks to speculation about the price of women in economics to the addressing of women students as 'girlie' or 'dear'. The examples are endless. We are a group of women who are sick and tired of being insulted. We've heard lots of examples from friends (not necessarily raving radical feminists either) having had similar experiences of discrimination. What can be done about it?

The matter can be brought up in Council, on the Standing Committee of the Board on education, on the Board of the Faculties, in faculties, Departmental Committees, in class. Student representatives on all these bodies should be made aware of complaints and prepared to deal with them on the bureaucratic level. Women are a large proportion of the

student body and thus warrant truly significant representation.

You may or may not have seen a leaflet asking for written accounts of people's experience of discrimination. The purpose of these written accounts is that they be published and distributed to expose discrimination on campus. Your experience is important – obviously it is often difficult to pinpoint incidents when the problem is so widespread, but let's face it, we have to do something because the staff aren't going to in the foreseeable future. I don't know about you, but I don't want to be penalised by this university just because I am a woman.

If you have been a victim of unfairness, bias or insult or have attended lectures/classes where this happens please write down a few paragraphs or so and send it to Di Riddell, Students' Association Office, in the Union Building. Please include your name and address so we can contact you if necessary. To prevent victimisation, your name will not be revealed.



## BOOK REVIEW ADRIAN BADDELEY.

*The Magic of Lewis Carroll* edited by John Fisher, Penguin, 280 pages. \$3.05.

This book is hardly about Lewis Carroll at all. A sort of American guided tour: never more than a superficial glimpse for fear of boring your readers.

It's divided into short sections a few pages each. First Fisher digs out a quotation, then writes whatever comes into his head next: a passage of Carroll, a puzzle or mathematical game, or a Victorian parlour magic trick, mumbling that 'Carroll would probably have seen this trick performed somewhere'... Fisher is an amateur magician (surprise, surprise).

A pretty sloppy way to bring in your hobby horse. He is also a BBC journalist, which probably explains the lousy style.

Ah, but impish, un-suppressible Lewis Carroll saves the day! So many delightful things, like his brilliant verse-riddles, bits of Alice and Through the Looking Glass, his arithmetical croquet game, The Tangled Tale, origami, logic games and his wit. He wrote a parody of Euclid which turns it into a political handbook: 'When a Proctor, meeting another Proctor, makes the votes on one side equal to those on the other, the feeling entertained by each side is called RIGHT ANGER.' Most of all, the

Cheshire Cat.

'...a dog's not mad, you grant that?'

'I suppose so,' said Alice.

'Well, then,' the Cat went on, 'you see a dog growls when it's angry, and wags its tail when it's pleased. Now I growl when I'm pleased, and wag my tail when I'm angry. Therefore I'm mad.' "

True to ritual form, Fisher indulges in a bit of armchair psychoanalysis and mystical interpretation. Why does Carroll leave the umlaut off someone's name? (Introduction, p. 17). We all know he only felt sexually un-threatened in the company of small girls. So what? A frail man with a beautiful imagination.

If you want to read just Lewis Carroll, there is a 'Complete Works of Lewis Carroll' (Modern Library Giant, \$4.95, 1240 pages) and of course plenty of editions of 'Alice in Wonderland' and 'Through the Looking-Glass' (e.g. Puffin, 85c). For a fairly good annotated edition (sometimes irritating) try Martin Gardner's 'The Annotated Alice' and 'The Annotated Snark' (Penguin, about \$1.70 each).

But if your attention lasts for two pages at a time and you like a book which flits from topic to topic saying nothing, then this is the book for you.

It has to be the most blatant example of cashing-in-on-a-famous-name that I have ever seen.

# INDONESIA TRAVEL QUESTION.

Argument for E.R. proposing AUS's Travel Boycott to Indonesia.

The fundamental question we are dealing with is in relation to what practical measures AUS can undertake to assist the struggle for self-determination in East Timor. This decision should be taken on political grounds, however some thought should also be given to the financial effect on AUS Student Travel.

We should realise that in the context of the Union as a whole, consideration is necessary as to whether or not the positive good achieved by this proposed action would outweigh an overall weakening of AUS.

If AUS was to be seriously affected and consequently not able to undertake future political commitments, we would oppose this motion. Our contention is that such a ban on travel to Indonesia will not weaken the Union but, rather, strengthen it. Consider the following: if the motion is lost, the issue has been raised on campuses and students have considered the financial and political arguments and have voted in favour of the ban. This means students are prepared overall to make a personal sacrifice for a political principle and consequently, the political base of AUS on campus has been strengthened.

In considering this motion, it is essential to realise that FRETILIN is maintaining its position in East Timor. It is vital, in the long term, for FRETILIN supporters to apply as much pressure on Indonesia towards a full military withdrawal, as is possible. In the international context, Australia is the most significant country to the external struggle of the East Timorese people. The most effective action Australians could undertake is to build a large opposition movement to the invasion and apply a full ban on goods and services to and from Indonesia. Having undertaken this action, Australian trade unions would be in a position to pursue international bans as indeed has already been done by some unions. *A principled stand on this question represents an initiative by the AUS which will greatly assist moves in trade union circles towards a full trade ban on Indonesia.*

We, as students often request trade union action on many social issues. Such action often requires great sacrifice on the part of the individual workers concerned. This motion represents an opportunity for students to state their full commitment to the Indonesian boycott and will be considered as significant by workers throughout the country when they consider what actions they should take.

We should also realise that AUS will always have contradictions between its principles and practice whilst it continues to operate a travel service. We believe that AUS should take principled stands on primary

contradictions and not allow an ever expanding travel company to dictate the political policy of the Union. We believe that this motion should be debated at General Student Meetings on every campus. Our purpose in moving this motion is to seek the full involvement of our membership in taking such an important decision, through the most democratic means at our disposal. We believe that AUS's credibility will suffer unless a full campus debate is seen to take place on this question.

Moved: Deputy President  
Seconded: Andrew Hewitt,  
Exec. Member Vic.



Against E.R. imposing AUS Travel Boycott to Indonesia.

**The Political Principle** – The debate over the continuation of AUS Student Travel flights to Indonesia has been cluttered with a basic confusion. That confusion primarily is a lack of understanding of the nature of a political principle. Despite the attitude of many of its advocates, there is no political principle which says "AUS S.T. shall not operate flights to Indonesia". The political principle involved here is the right of the East Timorese people to self determination. If AUS was to decide to impose a travel boycott on Indonesia, then such a boycott would be a tactic towards achieving the political principle of self determination for the East Timorese people.

There is nothing inviolate about a tactic – it should only be employed if it is a productive weapon in achieving the political principle involved. Hence in deciding whether AUS S.T. flights to Indonesia should be discontinued we need to assess the likely positive and negative implications of such an action, and on balance, come to a conclusion as to whether that would be a useful tactic in the circumstances. To say simply "that AUS's attitude to Indonesia's actions is hypocritical" is not only illogical and simplistic, but also apolitical. All factors involved need to be considered.

**Effect on Indonesia** – The effects on the Indonesian economy of an AUS S.T. boycott would be negligible. AUS Travel makes no use of the Indonesian flag carrier, Garuda. Nor does AUSST actively market Indon-

esia as a destination. The current AUSST program to Indonesia is only intended to fill the demand which already exists; it actually significantly undercaters for that demand. In other words the majority of students who travel to Indonesia would probably go there regardless of any AUS ST boycott. And AUS would have no way of preventing such students from utilising its charters to Kuala Lumpur, and then making their own way to Indonesia. Further, it's likely that the Indonesian government would be pleased, not disturbed, if AUSST discontinued its program – their actions over recent years have been intended to discourage student travellers in favor of high revenue tourists.

So, with the economic effects of an isolated boycott by AUSST being minimal, it's hard to conceive of the Indonesian government being dissuaded from its current course in East Timor by such an action.

What we must now consider are the potential negative effects of the employment of such a tactic. The weakening of the service provided by AUSST could have a significant negative impact on students' attitude towards AUS. In terms of union defence, the dangers of leaving such a significant demand completely unsatisfied, have been outlined, and could be utilised by political enemies as well as commercial competitors. As pointed out in the Board paper already circulated, such a decision would have a very significant effect on the financial standing of AUSST. It would necessitate the closure of the less viable travel office (probably W.A.I.T., S.A.I.T., Flinders and La Trobe), and this could have repercussions on those campuses. It would also necessitate the dismissal of a significant number of staff: and here we come into conflict with another political principle – the right of those staff members to assured employment.

Council considered all of these issues and decided that we should participate in a general trade union boycott initiated by the ACTU – such an action would be a productive tactic. However, in deciding against a boycott then, Council obviously recognised that such an action would be useless. The situation has barely changed since Council, if anything, the Union position has weakened. For AUS to initiate a boycott now would be CLASSIC TOKENISM. It would have no effect on the situation in East Timor; it would have significant negative effects on AUS; and it would be nothing but a facade, intended to escape the hard political work of organizing a mass based campaign on campus which could influence the attitude of the Australian government and so the whole balance of the Timorese situation.

No one doubts the sincerity of the AUS policy on Malaysia. In the Annual Council volume it is clearly a prime concern amongst AUS political campaigns this year. Yet Kuala Lumpur is the biggest destination for AUSST passengers to South East

Asia. Council decided that such passengers should be informed of the situation in Malaysia through materials to be displayed in AUSST offices. Such material will also be distributed regarding Indonesia. This is likely to have real political impact as a method of distributing information about the current situation.

If the ACTU decided on a general trade boycott, then AUS must participate. It could justify this as a workable tactic in the fight for self determination on the East Timorese people. At the moment, as an isolated action the AUSST boycott would have no positive impact. It could significantly jeopardise AUS – for nothing. It would be no more than tokenism and grandstanding. We urge you to vote against the E.R.

Peter O'Connor  
Services Vice President  
Jeff Hayler  
Finance C'tee Chairperson  
Mari Anna Shaw  
Travel Board Member

## FLIGHTS TO INDONESIA

Approximately 30% of all students who travel with AUS to Asia go to Indonesia, one way or the other. About 1,500 students specifically booked for Indonesia in the last year's programme.

It has been estimated that about 4,000 students travelled to Java and Sumatra in toto - many of these would have utilized AUS intra-Asia connections. Hence the effect of a cessation of travel to Indonesia would very likely be strongly felt in the Kuala Lumpur operation also.

### Financial implications –

At this stage a withdrawal from contracts currently held with QANTAS regarding the Indonesian program would probably entail a cancellation fee of \$85,000. Further we can only guess at the "all up" effect of this cancellation on AUSST finances. However it has been estimated that such an action would result in a loss of turnover to the Travel Company of \$2,000,000 and a consequent 15% drop in income. This would mean that were the Travel Company to continue at its present level of operation then a severe loss would be anticipated. In the present financial situation of the Travel Company this loss would not be able to be borne hence steps would have to be taken to offset it. This is particularly the case in this coming year when the new regulations introduced by the government regarding discounting are expected to have a significant negative effect on the financial result of the Travel Company.

AUSST could not continue to carry an office structure and staff complement suited to its previous higher turnover unless there was a significant increase in prices. This also would obviously have results in terms of demand for travel. Alternatively AUSST could resolve to reduce costs to match its new lower level of income. This could entail a significant reduction in staff (i.e. dismissals) and also the closing of the less financially viable offices. Submitted for and on behalf of the Travel Board,

Peter O'Connor,  
Services Vice President.

## A STORY

Elizabeth woke a second before the alarm went off. She pressed the button down in a nervous gesture, too fast for the morning and her head. Birds had been singing for hours and there was the sound of early morning traffic in the street. Tired truckies ending long journeys and seven o'clock commuters.

Rising slowly, the elusive images of the dream she'd had played in her mind. A glance at Leon, still asleep, reminded her of the previous night. Better not to think about it.

She grabbed a gown, the white satin one that had been through many late night and early morning scenes, could feel the fabric warming against her skin and each place that it touched became alive. The dream was gone leaving only distorted fragments. Wide awake now, she tried to hold them but the cruel unconsciousness snatched the memory away jealously. She sat down to a cup of coffee with the feeling of forever having lost a piece of honesty. That's what dreams are. Clearly remembered the truth shocks.

Josh was up too. "Hi there Liz, how's it going?" he said with a joking voice and a perfectly serious face. "Oh Jesus, I needed that coffee" she lied irrelevantly to avoid the necessity

of talking. In the silence that followed, she realised that she was grinning so turned away to shape her face into the mask that it normally wore — open, calm and completely unnatural.

Back in the bedroom, she gazed at the familiar scene. The same pile of books, clothes, the same stranger in her bed. She dressed, as always, to suit her mood. Unusual to the point of being outlandish, her clothes gave her a reputation that was as odd. Sometimes she longed to be one of those girls who follow the fashions or find a style that suits them. But she liked the wry extravagance of torn lace.

The leave-taking consisted of rinsing the coffee things while trying not to notice the pile of dishes in the sink. A quick mental check of what would be needed for the day and then she melted. With a little jumping movement, she bent to kiss Leon goodbye.

See you in the spring she said to the lifeless body half covered by a sheet. Although still asleep, his arms surrounded her in a natural movement of affection. Did he say "O good morning" or "Oh God morning"?

She savoured being alone as she walked down the street. As usual, it was too late to walk through the botanical gardens but it was pleasant by the river. Her footsteps kept in time with the chant that echoed in her head. O goodmorning O god morning O goodmorningOgod. It was a fine day.

PAM HEWITT

Nef

378.947  
WORK

# THE DANCE COMPANY (NSW)

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The Dance Company (NSW) Kathy Chard and Mark Wraith from John Butler's "The Wedding"





*anu*  
**STUDENTS' ASSOCIATION**  
*annual general meeting*  
*and*  
*general meeting*  
WED. 21st. 8pm.  
meetings room (union)

BUSINESS: ANNUAL GENERAL MEETING – The 1975 presidential report will be presented.

GENERAL MEETING – Debate on A.U.S. extraordinary resolution banning A.U.S.  
travel flights to Indonesia.

Reduction of hours of opening of the National Library.

THE STUDENTS' ASSOCIATION IS YOUR ASSOCIATION. THE GENERAL MEETINGS'

SPEND YOUR MONEY, SO COME TO THE MEETINGS AND MAKE YOUR OPINION COUNT.

# SISTER



## VAGINAL INFECTIONS

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page one



As with any other part of the body, there are many diseases which can affect the vagina. Some of these diseases are venereal—that means, caught through sexual contact. Many are not. This pamphlet deals with some vaginal infections which are extremely common. Although these infections do not have the disastrous physical consequences on the whole body of V.D. (syphilis and gonorrhoea) as so many women know, they can cause extreme discomfort and emotional disturbance.

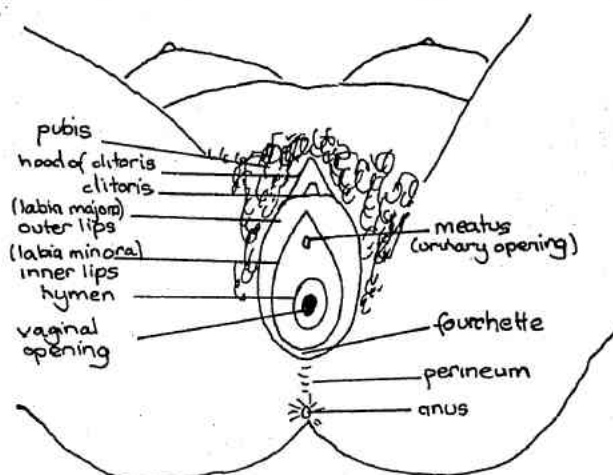
Unfortunately, because we are not taught enough about our bodies and how they work, and because of the stigmas which some people still attach to venereal disease and to our sexual organs in general, some women and girls are afraid to go to the doctor when they think they have an infection. In some cases the discomfort simply becomes part of their lives. Other women who go to a doctor get inadequate treatment — in both the attitude of the doctor towards them, and in the treatment itself.

In this pamphlet, our aim is to give you enough information so that you can demand the best possible treatment for yourself. It also tells you what steps you can take to prevent infection, and once you are sure what is wrong, how you can treat yourself if you choose to do so.

The information in this pamphlet has come from many sources, but mainly from work done by Leichardt Womens' Community Health Centre and Liverpool Womens' Health Centre.

## TAKE CARE OF YOUR BODY

## Non-Specific Vaginitis



Non-specific vaginitis really just indicates an irritated or otherwise unhealthy vagina, the cause of which is unknown. *In fact, most non-specific vaginitis is caused by several very common bacteria. According to the textbooks, only three organisms cause disease in the vagina — gonococcus (causing gonorrhoea), candida (causing thrush) and trichomonas.* There are several bacteria, which although normal in other parts of the body, especially in the bowel, if introduced into the vagina will cause infection — e.g. *streptococci*, *E. coli*.

**SYMPTOMS** — A greyish, smelly thin discharge is the commonest — often worse before periods. Most women have some increase in clear to white — to pale yellow discharge before periods. Very fastidious girls are likely to be more alarmed by this. It's a matter of how the secretion has changed and whether it's irritating, sore or very offensive.

*Severe cases may progress to yellowish thick discharge with severe swelling and soreness of outer genitals and vagina.* This may spread to the uterus and fallopian tubes and the bladder. There will then be lower abdominal pain, general unwellness and perhaps fever, swollen lymph glands in the groin and painful or frequent urination.

**TREATMENT** — Drugs to kill the yeast —

**NYSTATIN** — 100% effective in the laboratory but less so in practice because of folds in the vagina, scratching, and reinfection. Comes as cream or tablets.

**NATAMYAN** — (Pimafucian) kills trichomonas as well. But not as effective as nystatin for monilia or flagyll for trichomonas.

**MYSOZAL** — tinea cure as for gentian violet. Dilute and soak tampon in solution. Bright green, very effective. 1-2 tampons a day, two days running.

**MICRONAZOLE** — gynodactann, etc. Not on \$1.50 list but a little more effective than nystatin.

**GENTIAN VIOLET** — 1% aqueous — can be painted onto the vagina once or twice a week or diluted on a tampon inserted. Wear a pad and cotton pants. Very purple, very effective.

Drugs, etc. to change acid environment.

**VINEGAR** — 1/5 solution with water used as a douche, introduced via a big syringe, or on a half soaked tampon changed 4-5 times a day. Very soothing.

**ALKA SELZA** — 3-4 day in vagina or Soda Mints 3-4 times day. Foam frothy liquid.

**YOGHURT** — Spoon in via speculum or vaginal applicator. Use Bulgarian or natural yoghurt, four times day.

**BORIC ACID** — cheap. In solution via douche or syringe. In capsules, 4 times a day — very effective.

**ACIJEL** or **SPORASTATIN** — commercial preparations (no prescription) with boric acid, soothing agents.

**NO TIGHT PANTS, NO NYLON PANTS, AVOID PANTYHOSE.**

**NO SCRATCHING** — wipe from behind i.e. backwards when on the toilet.

**KEEP TREATING YOURSELF FOR AT LEAST TWO WEEKS** and for a week before each next two periods to be sure. Nystatin Oral tablets three times a day will clear yeast from the bowels, and thus stop recurrences.

**IMPROVE YOUR DIET, INCLUDE YOGHURT, YEAST TABS, ETC. NO INTERCOURSE TYPE SEX WHILST INFECTION IS SEVERE.**



## Monilia

**WHAT IS IT?** Monilia is a very common infection in the vagina and often in surrounding areas. Yeast is one of the organisms that lives in the vagina but normally their numbers are balanced so that none of them can infect you. An infection appears when this balance is upset, and often comes back after you think it's gone. Monilia is also called Candida Albicans, Thrush, fungus, yeast, 'the itch'.



**CAUSES** — The balance of organisms in the vagina can be upset in a number of ways. If your resistance is low — from another infection, unhealthy diet, lack of sleep, etc.

Antiseptic douches allow the yeast to increase. Pregnant or diabetic women are susceptible to yeast because of increase in glycogen (sugar enzyme). Unless monilia is treated during pregnancy it will be passed to the baby at birth. *Very rarely can you get a yeast infection from sexual intercourse.* If you do get it this way, the man had better be treated. Yeast grows more in hot and humid climates.

NYLON UNDERWEAR keeps in the moisture and heat which makes the yeast grow, but often COTTON or better NO UNDERWEAR won't.

Taking baths or bubble baths can cause yeast as soap can change the acidic environment of the vagina.

Yeast infections are more likely to occur in the week before your period, when there is more food available for the yeast, due to increase in hormone levels.

Birth control pills lessen the acidity of the vagina and can cause you to get yeast.

If you get another vaginal infection you can get yeast as the other infection or its treatment will alter the environment of the vagina.

It can spread from other areas such as anal.

Any antibiotics will kill the normal germs in the vagina — Flagyl to cure Trichomonas, often results in you getting monilia.

**SYMPTOMS** — Itching and inflammation of the vulva and outer vagina, it may be painful during intercourse.

White discharge that may be light or quite heavy and thick (rather like cottage cheese) and which may smell like yeast (white discharge rather than yellowish which is an indication of trich.)

There may be yeast appearing as white patches on the wall of the vagina. Underneath the patches the vagina is redder than usual, raw and irritated.

Sometimes burning after urination and more frequent urination.

**TREATMENT** — Symptoms are often confused with other vaginal infections so a medical examination is advisable to determine that the infection is monilia. This involves a check up and a painless swab.

- 1) — Doctors usually prescribe pessaries containing nystatin. Other pessaries are Pimafucin and Gynodactarin. These are inserted high into the vagina where they will spread over the surface of the cervix and vagina killing all the yeast. The treatments work directly to kill the yeast but do not change the environment of the vagina, so are most effective if combined with vinegar or yoghurt (see below).
- 2) — Yoghurt inserted into the vagina will often put back normal bacteria restoring a balance to the environment. DO NOT use yoghurt if you are not sure the infection is monilia because if it is a bacterial infection yoghurt will add more bacteria and increase the infection.
- 3) — Vinegar restores the normal acid environment in the vagina

which will reduce number of yeast cells. The vinegar must be diluted with water (about one part vinegar to three parts water). A douche may be bought from most chemists (about \$6-8, fairly expensive).

A less complicated method of douching is to lie in the bath with your legs in the air, and have someone pour the vinegar solution into your vagina. Another method for using diluted vinegar is to dip a small tampon in the diluted vinegar. (See instructions as for non-specific vaginitis).

4) – Gentian Violet (See instructions as for non-specific vaginitis).

**DO NOT HAVE SEXUAL INTERCOURSE WHILE YOU ARE INFECTED OR HAVING TREATMENT AS IT WILL CAUSE IRRITATION TO SPREAD AND ALSO MAY INFECT YOUR PARTNER, WHO COULD REINFECTION SOMEONE ELSE. MEN MAY CARRY MONILIA WITHOUT HAVING THE SYMPTOMS.**

**PREVENTION** – Wipe yourself from front to back so that yeasts in your bowel won't get in your vagina.

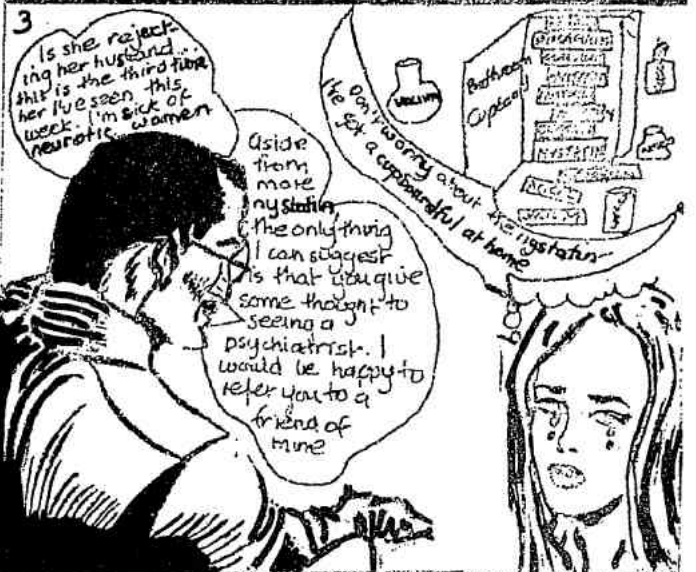
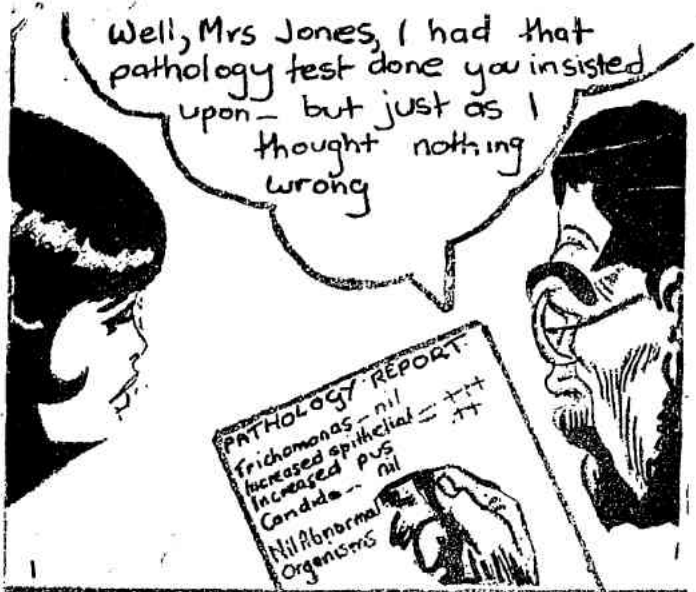
**WEAR COTTON UNDERWEAR.** Wash vaginal area daily with mild soap. i.e. not heavily perfumed.

**DO NOT USE VAGINAL DEODORANTS AND SPRAYS AS THESE DO IRRITATE.** Avoid scratching, it causes the infection to spread, e.g. to eyes. **AVOID PANTYHOSE.**

Maybe a change of brand (type) of contraceptive pill.







staple here



I don't know if you're  
telling the truth anymore.  
The doctor says there is  
nothing wrong. Perhaps  
you just don't want  
to screw me  
anymore.

But doctor, I know there  
is something wrong.  
It's worse than  
ever today. My  
husband is  
beginning to get  
really upset...  
I feel as though I'll go  
mad if it doesn't  
get better!



2

Of course you're not  
imagining it... practically  
everyone I know has  
had it... a friend of a  
friend of a friend told me  
of a women's clinic. They  
suggested she use vinegar  
double with the nystatin...



I'm so  
desperate  
I'd try anything -  
let's try and find  
out where the  
women's  
clinic is.

4

page nine

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## Trichomonas

Although men don't usually show symptoms, they carry trichomonas and so ..... ALL PARTNERS MUST BE TREATED ..... unfortunately, doctors do not always explain this.



Trichomonas is a common vaginal infection. Trichomonads are one celled parasites that feed on cells, particularly blood cells, (so they are likely to increase the duration of your period). They are always present in the vagina, intestine and rectum of many women, men and children, but usually cause no symptoms. They can also live outside of the body in a warm, moist environment. Trichomonas can occur at any age. Usually there is a balance of acids in the lining of the vagina, you are likely to get trich. when this lining is upset.

**CAUSES** — through any genital contact — from moist things such as bathing suits, underwear, towels, wash cloths, etc. — it can be carried from the rectum to the vagina by wiping forward, anal intercourse followed by vaginal intercourse without washing in between.— birth control pills make you more susceptible because they can change the normal balance of your vagina, making your body less able to ward off infection — Trich. grows better in low-acid regions.

**SYMPTOMS** — You will have a vaginal discharge which is thin and foamy. If there is a mixed infection the discharge which is thin normally, may be thicker, yellowish, greenish in colour. If there is a lot of discharge, there may be irritation and chafing of the inner thighs.

There is quite often itching, swelling, and soreness of the vagina and vulva.

There could be a burning sensation especially when passing urine.

Trich. may also cause urinary tract infections.

**TREATMENT** — YOU SHOULD HAVE A VAGINAL SWAB TAKEN TO ENSURE THAT IT IS TRICH. THAT YOU HAVE — IT IS OFTEN CONFUSED WITH MONILIA.

- The most common medical treatment given is a drug called Flagyl. It is taken orally and can be obtained by prescription. It should be taken between meals because food will cause less of it to be absorbed. It only takes seven days to cure you.

*Side effects:* You should not drink alcohol, because Flagyl prevents breakdown of the alcohol in the blood, and may cause you to vomit. FLAGYL should be avoided if you have a history of diseases of the blood or central nervous system.

Do not use during pregnancy or during breast feeding.

Flagyl may cause nausea, dizziness, cramps, diarrhoea and *page eleven*

gastric upset, and blood disorders. You could also develop Monilia.

**FLAGYL IS AN UNPLEASANT DRUG --  
UNFORTUNATELY IT IS THE BEST  
AVAILABLE TREATMENT FOR TRICH.**

- PIMAFUCIN is another drug often prescribed by doctors. It comes in the form of pessaries (or vaginal creams) and are inserted into the vagina. This takes about twenty days and is about 85% cure. Hardly any side effects.
- Vinegar douche may be used for recurring Trich. Use one part vinegar to three parts water. It will give relief but may not destroy all Trichomonads. Use after period for three weeks.
- INTERCOURSE SHOULD BE AVOIDED DURING TREATMENT TO AVOID REINFECTION, OR CONDOMS COULD BE USED.
- YOUR PARTNER SHOULD ALSO BE TREATED.

**PREVENTION AND GENERAL HEALTH CARE** - Wipe yourself from front to behind - WEAR COTTON UNDERWEAR, NEVER NYLON - wash vagina with mild soap, NOT HEAVILY PERFUMED - pat dry after bathing and keep dry - avoid scratching as it causes spread of infection - AVOID PANTYHOSE, AND TIGHT PANTS. THESE STOP AIR FROM CIRCULATING.



NOW JUST RELAX, MISS JONES....

# Cystitis

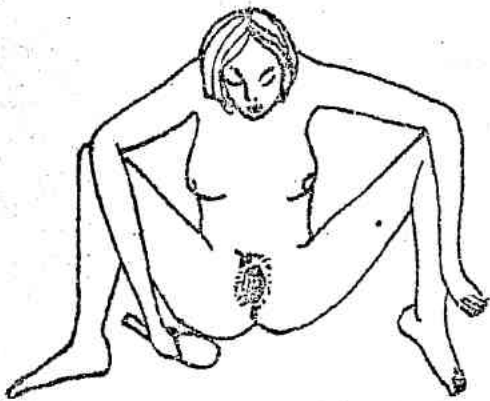
Fuck! It really hurts when I piss. I wonder what it is....



**CYSTITIS** is the inflammation of the mucous membrane (inner lining) of the bladder. Women are very susceptible to urinary infections. The shortness of the female urethra and the position of the urinary openings give organisms ready access to the bladder.

Usually when women first get cystitis they have never heard about it before and all they are interested in is getting something to relieve the incredible discomfort.





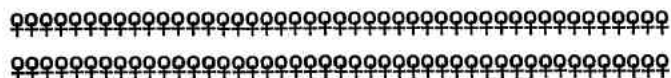
**SYMPTOMS** — there is a pressing need to urinate a lot. Often the urine acids and burns and a few minutes afterwards the short feeling of comfort is replaced by the desire to go to the toilet again, even though a few drops only can be managed. Passing urine is often painful.

Often a pain in the lower abdomen and or lower back. Pus and bacteria are constantly present in the urine, and in severe cases, blood as well.

Urinary tract infections occur quite often in pregnancy. Any symptoms of cystitis need particular treatment at this time, owing to the susceptibility of the bacteria to travel from the bladder up the urethra (dilated by pregnancy) to the kidney.

The most usual cause of the infection is bacteria, coupled with factors of the infection may be hormonal imbalance (the pill perhaps has a lot to answer for). Bacteria tend to gather in groups and are sensitive to environmental changes. Degrees of acidity, and moisture, are influencing factors also. So diet is obviously important too.

Bacteria can reach the urinary tract through the bloodstream, lymphatics, urethra, ureters, direct infection by trauma or extension from neighbouring organs. One of the commonest kinds of infecting bacteria is *Escherichia coli* which is an inhabitant in the digestive tract. *E. Coli* does not have to travel far from the rectum to urinary opening.



**CAUSES** — Acid imbalance in the urine — damage to urethra from near-by surgery, child birth or intercourse — diabetes, the sugar level of the urine — low body resistance — Trich — irritation from drugs in urine (including tea, coffee, and alcohol).

**PREVENTION HINTS** —

- \* wash the perineum (area between the anus and urethra opening)
- \* wash the perineum after a bowel action
- \* *do not use strong soaps or vaginal deodorants*
- \* wear cotton underwear
- \* drink three to four pints of water daily to keep urine diluted
- \* avoid excessive alcohol, coffee and tea drinking
- \* go to the toilet as often as possible
- \* wipe anus from front to back
- \* if possible use a lubricant during intercourse. NOT petroleum jelly.
- \* Do not put anything into your vagina you wouldn't put into your mouth.

**WITH ONSET OF AN ATTACK-**

- \* Drink copious amounts of water. You can add a glass of bicarbonate of soda to this treatment.
- \* Stop drinking tea and coffee. No alcohol.
- \* Go to bed with a hot water bottle under your abdomen if pain is severe.
- \* Avoid strenuous intercourse.
- \* Change to a vegetable diet to change the urine from highly acid to alkaline (foods such as green leafy vegetables, wheat-germ and soya flour, liver and yeast are preferable during attacks).
- \* **SEEK MEDICAL ATTENTION EARLY**





## V.D.

What is VD? A disease which can be caught through genital contact. It is not caught from toilet seats, towel, bed-clothes, door handles or dirty cups. You catch it from having sex with someone from either the opposite or same sex. The germs live in the sex organs and die very quickly away from the heat of the body.

**HAVING VD IS NOT A CRIME.** Many people, women especially, feel guilty and ashamed when they think they have VD. This often means that the disease is left untreated and can be passed on to other people.

**WHAT ARE THE SYMPTOMS?** VD is dangerous as it is a hidden disease.

**GONORRHOEA** — This disease displays symptoms more readily in men than women. **MEN** — the tube in the penis become inflamed about two to ten days after the germs have entered the body. This causes a burning sensation when urinating, and a yellowish drop or discharge at the tip of the penis. **WOMEN** — the germs travel up the vagina and breed in the opening of the womb. But often you don't know the germs are there. Pus and discharge caused by the germs mingle with the normal healthy secretions and can pass out of the body unnoticed. Pain when urinating may be a sign. If not treated, the germs will spread and cause inflammation in other parts of the body. One of the first parts affected will be your tubes — severe pains and sometimes fever. If no treatment is given, the tubes may become permanently blocked and you may become sterile. A baby born while the mother has gonorrhoea may be severely afflicted.

**SYPHILIS** — This is an **EXTREMELY SERIOUS DISEASE IF LEFT UNTREATED.** It affects men and women in much the same way. **FIRST STAGE** — the first sign is a painless ulcer which usually appears on or near the sex organs three to six weeks after the infection has occurred. The ulcer is full of syphilis germs which can infect a minute crack in the skin of anyone coming into contact with them. After a few days or weeks, the ulcer disappears of its own accord. **SECOND STAGE** — the germs spread through the body, and a few weeks later they can cause skin rashes, fever, a sore throat or loss of hair. **THIRD STAGE** — the germs will live in the body for many years with serious affects, even death.